

County: Oneida  
FRIENDLY VILLAGE  
P. O. BOX 857

RHINELANDER 54501 Phone: (715) 365-6900  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 145  
Total Licensed Bed Capacity (12/31/01): 151  
Number of Residents on 12/31/01: 132

Facility ID: 3500

Page 1

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 127

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		44.7
Supp. Home Care-Personal Care	No					1 - 4 Years		37.1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.8	Under 65	6.1	More Than 4 Years		18.2
Day Services	No	Mental Illness (Org./Psy)	27.3	65 - 74	12.1			-----
Respite Care	No	Mental Illness (Other)	3.0	75 - 84	34.8			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	1.5	85 - 94	39.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.6	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.8		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.3		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	13.6	65 & Over	93.9	-----		
Transportation	No	Cerebrovascular	7.6		-----	RNs		8.1
Referral Service	No	Diabetes	7.6	Sex	%	LPNs		8.0
Other Services	No	Respiratory	5.3		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	27.3	Male	29.5	Aides, & Orderlies		
Mentally Ill	No		-----	Female	70.5			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	15	100.0	322	83	89.2	103	0	0.0	0	24	100.0	157	0	0.0	0	0	0.0	0	122	92.4
Intermediate	---	---	---	8	8.6	86	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	8	6.1
Limited Care	---	---	---	2	2.2	75	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.5
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	15	100.0		93	100.0		0	0.0		24	100.0		0	0.0		0	0.0		132	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	6.9	Daily Living (ADL)	Independent			
Private Home/With Home Health	1.0	Bathing	17.4	65.9	16.7	132
Other Nursing Homes	2.8	Dressing	21.2	62.1	16.7	132
Acute Care Hospitals	87.6	Transferring	37.1	46.2	16.7	132
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	34.1	50.8	15.2	132
Rehabilitation Hospitals	0.0	Eating	70.5	23.5	6.1	132
Other Locations	1.7	*****				
Total Number of Admissions	290	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	6.1	Receiving Respiratory Care		5.3
Private Home/No Home Health	38.5	Occ/Freq. Incontinent of Bladder	47.7	Receiving Tracheostomy Care		0.8
Private Home/With Home Health	11.1	Occ/Freq. Incontinent of Bowel	21.2	Receiving Suctioning		0.8
Other Nursing Homes	6.6			Receiving Ostomy Care		1.5
Acute Care Hospitals	15.3	Mobility		Receiving Tube Feeding		1.5
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	3.8	Receiving Mechanically Altered Diets		22.0
Rehabilitation Hospitals	0.0					
Other Locations	6.6	Skin Care		Other Resident Characteristics		
Deaths	21.9	With Pressure Sores	3.8	Have Advance Directives		64.4
Total Number of Discharges		With Rashes	4.5	Medications		
(Including Deaths)	288			Receiving Psychoactive Drugs		37.1

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	83.8	80.3	1.04	83.5	1.00	84.4	0.99	84.6	0.99
Current Residents from In-County	75.8	72.7	1.04	79.2	0.96	75.4	1.00	77.0	0.98
Admissions from In-County, Still Residing	14.1	18.3	0.77	22.5	0.63	22.1	0.64	20.8	0.68
Admissions/Average Daily Census	228.3	139.0	1.64	125.7	1.82	118.1	1.93	128.9	1.77
Discharges/Average Daily Census	226.8	139.3	1.63	127.5	1.78	118.3	1.92	130.0	1.74
Discharges To Private Residence/Average Daily Census	112.6	58.4	1.93	51.5	2.19	46.1	2.44	52.8	2.13
Residents Receiving Skilled Care	92.4	91.2	1.01	91.5	1.01	91.6	1.01	85.3	1.08
Residents Aged 65 and Older	93.9	96.0	0.98	94.7	0.99	94.2	1.00	87.5	1.07
Title 19 (Medicaid) Funded Residents	70.5	72.1	0.98	72.2	0.98	69.7	1.01	68.7	1.03
Private Pay Funded Residents	18.2	18.5	0.98	18.6	0.98	21.2	0.86	22.0	0.83
Developmentally Disabled Residents	0.8	1.0	0.76	0.7	1.06	0.8	0.96	7.6	0.10
Mentally Ill Residents	30.3	36.3	0.84	35.8	0.85	39.5	0.77	33.8	0.90
General Medical Service Residents	27.3	16.8	1.63	16.9	1.62	16.2	1.68	19.4	1.40
Impaired ADL (Mean)	39.4	46.6	0.85	48.2	0.82	48.5	0.81	49.3	0.80
Psychological Problems	37.1	47.8	0.78	48.7	0.76	50.0	0.74	51.9	0.72
Nursing Care Required (Mean)	5.0	7.1	0.70	6.9	0.72	7.0	0.71	7.3	0.68